Debtor 1 Markus Washington Debtor 2 First Name Middle Name Last Name United States Bankruptory Court for the: WESTERN DISTRICT OF TEXAS  Case number 24-51992 United States Bankruptory Court for the: WESTERN DISTRICT OF TEXAS  Case number 24-51992    Check if this is an amended filing  Offficial Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information 12/15  Be as complete and accurate as possible. If two married people are filing logether, both are equally responsible for supplying correct information, fill out all of your schedules first; then complete the information on this form, if you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part II: Summarize Your Assets  Your assets    Vour assets								
Debtor 2   Spaces #, Hing    First Name   Miscile Name   Last Na	Fill	in this infor	mation to identify your	case:				
Debtor 2 (Scoous R, Hing) First Nume Middle Name Last Name  United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS  Case number 24-51992 (If Novem)  Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information 12/15  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. Fill out all of your schedules first, then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 62, Total personal property, from Schedule A/B	Deb	tor 1						
United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS    Case number   24-51992   Check if this is an amended filing	Deh	tor 2	First Name	Middle Name	Last Name			
Case number 24-51992    Check if this is an amended filling			First Name	Middle Name	Last Name			
Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information  12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first, then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part :  Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 52, Total real estate, from Schedule A/B	Unit	ed States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	OF TEXAS			
Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form, if you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 62, Total personal property, from Schedule A/B	Cas	e number	24-51992					
Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets  Your assets  Your assets  Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	(if kno	_					_	
Bummary of Your Assets and Liabilities and Certain Statistical Information  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. First, then complete the information of this form. If you are filing amended schedules after you file your original forms, you must fill out all only our schedules first; then complete the information form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 62, Total personal property, from Schedule A/B							amen	ded filing
Bummary of Your Assets and Liabilities and Certain Statistical Information  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. First, then complete the information of this form. If you are filing amended schedules after you file your original forms, you must fill out all only our schedules first; then complete the information form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 62, Total personal property, from Schedule A/B								
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fil out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B								
Information. Fill out all of your schedules first; then complete the information on this form. If you are filling amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Part 1:   Summarize Your Assets								
Part 1: Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	infor	mation. Fill	out all of your schedule	es first; then complete th	e information on this for	m. If you are filing amend		
Your assets Value of what you own	your	original for	ms, you must fill out a r	new <i>Summary</i> and check	the box at the top of thi	s page.		
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	Part	1: Sumn	narize Your Assets					
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B								
1a. Copy line 55, Total real estate, from Schedule A/B							Value	of what you own
1c. Copy line 63, Total of all property on Schedule A/B	1.	Schedule A 1a. Copy lin	A/B: Property (Official Fone 55, Total real estate, from	rm 106A/B) om Schedule A/B			\$	687,650.00
Part 2: Summarize Your Liabilities  Your liabilities Amount you owe  2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		1b. Copy lir	ne 62, Total personal prop	perty, from Schedule A/B			\$	130,501.99
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		1c. Copy lir	ne 63, Total of all property	on Schedule A/B			\$	818,151.99
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	Part	2: Sumn	narize Your Liabilities					
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F							Your li	abilities
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F								
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	2.					of Part 1 of Schedule D	\$	434,791.72
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	3.							44 405 67
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I.  5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J.  \$ 6,154.06		3a. Copy to	he total claims from Part	(priority unsecured claim	s) from line 6e of Schedule	e E/F	\$	11,185.67
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  \$ 6,154.06		3b. Copy the	he total claims from Part 2	2 (nonpriority unsecured cl	aims) from line 6j of Scheo	dule E/F	\$	2,500.00
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  \$ 6,154.06								
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  \$ 6,154.06						Your total liabilities	\$	448,477.39
Copy your combined monthly income from line 12 of <i>Schedule I</i>	Part	3: Sumn	narize Your Income and	Expenses				
Copy your monthly expenses from line 22c of Schedule J	4.	Schedule I: Copy your	Your Income (Official Fo	rm 106l) e from line 12 of <i>Schedul</i> e	I		\$	10,644.00
Part 4: Answer These Questions for Administrative and Statistical Records	5.						\$	6,154.06
	Part	4: Answ	er These Questions for	Administrative and Stati	stical Records			

- 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
  - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
  - Yes
- 7. What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 9,854.09

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	11,127.89
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	11,127.89

	tion to identify					
Debtor 1	Markus Was	hington Middle	Namo	ast Name		
Debtor 2	i iist Name	Middle	iname L	ast ivallie		
(Spouse, if filing)	First Name	Middle	Name L	ast Name		
United States Bank	ruptcy Court for	the: WESTERN	DISTRICT OF TEXAS			
Case number 24	-51992					☐ Check if this is an amended filing
Official Forr		-				
<u>Schedule</u>	A/B: Pr	operty				12/15
Part 1: Describe Ea			her Real Estate You Own o			
_	, , ,	unable interest in a	ny residerice, building, lai	nd, or similar property?		
☐ No. Go to Part 2.  Yes. Where is the		unable interest in a	ny residence, bunding, iai	nd, or similar property?		
Yes. Where is the second of th	ne property?		What is the property? (  Single-family hom	Check all that apply	Do not deduct secured of	laims or exemptions. Put
Yes. Where is the second of th	ne property?		What is the property? ( ■ Single-family hom □ Duplex or multi-ui □ Condominium or	Check all that apply ne nit building cooperative	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Yes. Where is the second of th	ne property?		What is the property? ( ■ Single-family hom □ Duplex or multi-u	Check all that apply ne nit building cooperative	the amount of any secur Creditors Who Have Cla	ed claims on <i>Schedule D:</i> ims Secured by Property.  Current value of the
Yes. Where is the second of th	he property?  A Path  available, or other desc	cription	What is the property? ( ■ Single-family hom □ Duplex or multi-u □ Condominium or □ Manufactured or	Check all that apply ne nit building cooperative mobile home	the amount of any secur Creditors Who Have Cla	ed claims on Schedule D: ims Secured by Property.
Yes. Where is the second of th	he property?  A Path  available, or other desc	78009-0000	What is the property? (  Single-family hom Duplex or multi-un Condominium or  Manufactured or Land Investment prope Timeshare Other	Check all that apply ne nit building cooperative mobile home	the amount of any secur Creditors Who Have Class  Current value of the entire property? \$687,650.00  Describe the nature of (such as fee simple, te	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own? \$687,650.00  your ownership interest
Yes. Where is the second of th	he property?  A Path  available, or other desc	78009-0000	What is the property? (  Single-family hom Duplex or multi-un Condominium or  Manufactured or Land Investment prope Timeshare Other	Check all that apply ne nit building cooperative mobile home	the amount of any secur Creditors Who Have Class  Current value of the entire property?  \$687,650.00  Describe the nature of	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own? \$687,650.00  your ownership interest
Yes. Where is the second of th	he property?  A Path  available, or other desc	78009-0000	What is the property? (  Single-family hom Duplex or multi-un Condominium or  Manufactured or Land Investment prope Timeshare Other  Who has an interest in	Check all that apply ne nit building cooperative mobile home	current value of the entire property? \$687,650.00  Describe the nature of (such as fee simple, te a life estate), if known.	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$687,650.00
1.1 182 Lantana Street address, if a	he property?  A Path  available, or other desc	78009-0000	What is the property? (  Single-family hom Duplex or multi-ui Condominium or  Manufactured or Land Investment prope Timeshare Other Who has an interest in Debtor 1 only Debtor 2 only Debtor 1 and Debtor 1	Check all that apply ne nit building cooperative mobile home erty  the property? Check one	the amount of any secur Creditors Who Have Class Current value of the entire property? \$687,650.00  Describe the nature of (such as fee simple, te a life estate), if known.  Fee Simple  Check if this is co	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own? \$687,650.00  your ownership interest nancy by the entireties, or
1.1  182 Lantana Street address, if a	he property?  A Path  available, or other desc	78009-0000	What is the property? (  Single-family hom Duplex or multi-ui Condominium or  Manufactured or Land Investment prope Timeshare Other  Who has an interest in Debtor 1 only Debtor 2 only At least one of the	Check all that apply ne nit building cooperative mobile home erty  the property? Check one otor 2 only e debtors and another wish to add about this ite	the amount of any secur Creditors Who Have Classifications.  Current value of the entire property? \$687,650.00  Describe the nature of (such as fee simple, te a life estate), if known.  Fee Simple  Check if this is co (see instructions)	ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own? \$687,650.00  your ownership interest nancy by the entireties, or

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debt	or 1 Markus Washington	Case number (if known) 24-51992		
3. <b>C</b> a	ars, vans, trucks, tractors, sport utility v	vehicles, motorcycles		
	No			
	Yes			
	Tourse		Do not deduct secu	red claims or exemptions. Put
3.1	Make: Toyota	Who has an interest in the property? Check one	the amount of any s	ecured claims on Schedule D:
	Model: Camry Year: 2019	☐ Debtor 1 only		e Claims Secured by Property.
	Approximate mileage: 88000	☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only	Current value of th entire property?	e Current value of the portion you own?
	Other information:	At least one of the debtors and another	ontino proporty :	portion you own.
	NFS Vehicle; Toyota Loan in			
	NFS only	■ Check if this is community property	\$20,732.	00 \$20,732.00
	Spouse's Sole management	(see instructions)		
	community property			
3.2	Make: Indian	Who has an interest in the property? Check one	Do not deduct secu	red claims or exemptions. Put
3.2	Model: Chieftain Ltd	Debtor 1 only		ecured claims on Schedule D: e Claims Secured by Property.
	Year: 2019	Debtor 2 only		
	Approximate mileage: 11000	Debtor 1 and Debtor 2 only	Current value of th entire property?	e Current value of the portion you own?
	Other information:	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$14,785. ———	00 \$14,785.00
5 <b>A</b>	dd the dollar value of the portion you o	own for all of your entries from Part 2, including	g any entries for	
		e that number here		\$35,517.00
Part :	3: Describe Your Personal and Household	Items		
	ou own or have any legal or equitable i	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	ousehold goods and furnishings xamples: Major appliances, furniture, liner l No	ns, china, kitchenware		
	Yes. Describe			
	Household Go	oods and Furniture		\$10,000.00
	ectronics ixamples: Televisions and radios; audio, vi including cell phones, cameras, I No I Yes. Describe	ideo, stereo, and digital equipment; computers, pr media players, games	inters, scanners; music co	llections; electronic devices
	Electronics			\$3,000.0
	TV and freeze	r from 2019		\$200.0

D	ebtor 1	Markus Washington	Case number (if known)	24-51992
8.		bles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pionther collections, memorabilia, collectibles	ctures, or other art objects; stamp, coin,	or baseball card collections;
	■ No □ Yes.	Describe		
9.		ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycle musical instruments	es, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
	□ No ■ Yes.	Describe		
		Gym Equipment		\$1,000.00
10	■ No	ns  oles: Pistols, rifles, shotguns, ammunition, and related equipment  Describe		
11	□ No	s  bles: Everyday clothes, furs, leather coats, designer wear, shoes, access  Describe	ssories	
	<b>–</b> 165.			<b>\$200.00</b>
		Wearing Apparel		\$800.00
	Yes.	Describe  Jewelry		\$1,400.00
_				· , ,
13	Examp ■ No	rm animals  bles: Dogs, cats, birds, horses  Describe		
14	□ No	her personal and household items you did not already list, includi  Give specific information	ng any health aids you did not list	
		Lawn Maintenance Equipment		\$50.00
_		zami maniconanoo zquipmoni		
1		the dollar value of all of your entries from Part 3, including any ent art 3. Write that number here		\$16,450.00
P	art 4: Des	scribe Your Financial Assets		
D		vn or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	Examp  □ No	oles: Money you have in your wallet, in your home, in a safe deposit bo	x, and on hand when you file your petition	on

Markus WashingtonCase number (if known)24-51992

Cash \$13.00

17. Depos	its of	money
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Debtor 1

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

Yes			Institution name:	
1	17.1.	Checking	Ally acct 8997 (W)	\$10.00
1	17.2.	Savings	Ally acct 7137 (W)	\$10,006.01
1	17.3.	Savings	Ally acct 7392 (W)	\$2.92
1	17.4.	Savings	Ally acct 2459 (H)	\$4.11
1	17.5.	Savings	Ally acct 0811 (H)	\$0.78
1	17.6.	Other financial account	CashApp - (W)	\$0.00
1	17.7.	Other financial account	CashApp (H)	\$320.04
1	17.8.	Checking	NFCU Acct 4190	\$0.00
1	17.9.	Checking	NFCU Acct 4190	\$0.00
1	17.10	Savings	NFCU Acct 1485	\$0.00
1	17.11	Savings	NFCU Acct 0479 (W)	\$0.40
1	17.12	Savings	NFCU Acct 3917 (daughter)	\$0.06
1	17.13	Savings	NFCU Acct 1295 (daughter)	\$0.02
1	17.14	Other financial account	PayPal	\$7.00

Debtor 1	Markus Washingtor	1		Case number (if known) 24-51	992
	17.16	Other financial account	AppleCash (H)		\$16.55
	17.17	Other financial account	AppleCash (W) \$0.00		\$0.00
	17.18	Checking	USAA Acct 6981		\$17,061.18
	17.19	Checking	USAA Acct 3039		\$998.36
Example —	mutual funds, or publices: Bond funds, investment		erage firms, money market account	s	
■ No □ Yes		Institution or issuer na	me:		
joint ver □ No ■ Yes. (	Give specific information Na	me of entity:	 Sorority, Inc - Non-profit	% of ownership:	
	Re Se Pa	lay Bank Acct 2502 pt 1, 2023	2 - closed for no activity ailing address \$180 every		
	_	Assets and No oth	ner Debts	%	\$0.00
	Str \$1! Re Ca Lia	98.75 lay Bank Acct App shApp - \$0.00 ibility owed to Stud	lit card payment account) - \$222.09 lent - Funds in accounts es or deposits for classes	%	\$0.00
Negotia Non-neg ■ No	ble instruments include protiable instruments are ive specific information	personal checks, cashi those you cannot trans	able and non-negotiable instrume ers' checks, promissory notes, and after to someone by signing or delive	money orders.	
	ent or pension account es: Interests in IRA, ERI		3(b), thrift savings accounts, or othe	r pension or profit-sharing plans	
Yes. Li	st each account separa	ely. of account:	Institution name:		
	IRA		Ally 6661(W)		\$3,525.56
Your sha	deposits and prepayn	ts you have made so th	nat you may continue service or use ablic utilities (electric, gas, water), te		

		Military Retirement Midland I Insurance (Term Life) \$400,0		ebtor	Unknown
		Militany Datinament Midland I	life		
	□ No ■ Yes. Name the insurance	company of each policy and list its v Company name:	value. Benefi	ciary:	Surrender or refund value:
31.		<b>icies</b> y, or life insurance; health savings ac	count (HSA); credit, home	owner's, or renter's insuran	ce
	☐ Yes. Give specific inform				
30.		owes you disability insurance payments, disabi d loans you made to someone else	lity benefits, sick pay, vaca	ition pay, workers' compen	sation, Social Security
		Right to Receive C	CS 167.00 /mo	Child Support	Unknown
	■ Yes. Give specific informa	ation			
29.	Family support  Examples: Past due or lum  □ No	p sum alimony, spousal support, chil	d support, maintenance, d	vorce settlement, property	settlement
28.	Tax refunds owed to you  ■ No □ Yes. Give specific informa	ation about them, including whether y	ou already filed the returns	s and the tax years	
M	oney or property owed to yo	ou?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	☐ Yes. Give specific inform				
27.	Licenses, franchises, and		sociation holdings, liquor lic	enses, professional license	s
	■ No □ Yes. Give specific information	,	3 - 3 - 3 -		
26.		marks, trade secrets, and other in names, websites, proceeds from roy		ments	
25.	<ul><li>Trusts, equitable or future</li><li>No</li><li>☐ Yes. Give specific inform.</li></ul>	e interests in property (other than a a a ation about them	anything listed in line 1),	and rights or powers exe	cisable for your benefit
		ition name and description. Separate		- , ,	
	26 U.S.C. §§ 530(b)(1), 529/		, . J ,	,	
24		RA, in an account in a qualified AE	BLE program, or under a	gualified state tuition pro	oram.
۷.	■ No	r name and description.			
23		periodic payment of money to you, e	illici ioi ilic oi ioi a riuribo	i di years)	

Debtor 1

**Markus Washington** 

Deni	or i warkus washing	gton Case number (ii known)	24-31992
 	f you are the beneficiary of someone has died.	at is due you from someone who has died a living trust, expect proceeds from a life insurance policy, or are currently entitled to recei	ve property because
	No Yes. Give specific informa	ation	
_	res. Give specific informa	audii.	
	Examples: Accidents, emplo	s, whether or not you have filed a lawsuit or made a demand for payment byment disputes, insurance claims, or rights to sue	
	No Yes. Describe each claim		
_	No	quidated claims of every nature, including counterclaims of the debtor and rights to	set off claims
	Yes. Describe each claim		
_	ny financial assets you d No	id not already list	
	Yes. Give specific information	ation	
		Right to Receive VA Benefits \$4335.16/mo	Unknown
		g	
		Right to Receive Retirement Income \$3128.00/mo	Unknown
		ragin to receive retirement moonie \$5125.55/me	
		Г	
		I of your entries from Part 4, including any entries for pages you have attached ber here	\$32,010.99
		L	
Part 5	Describe Any Business-R	elated Property You Own or Have an Interest In. List any real estate in Part 1.	
37. <b>D</b> o	you own or have any legal o	or equitable interest in any business-related property?	
	No. Go to Part 6.		
	Yes. Go to line 38.		
			Current value of the
			portion you own?  Do not deduct secured claims or exemptions.
38. <b>A</b>	ccounts receivable or co	mmissions you already earned	
	No		
	Yes. Describe		
	office equipment, furnishin Examples: Business-related No	ngs, and supplies I computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, o	chairs, electronic devices
	Yes. Describe		
	No	ment, supplies you use in business, and tools of your trade	
	Yes. Describe		
		1	
	Us	118 Chevy Silverado 1500, 85K miles: sed for weapons training so doesn't drive for personal use due to	\$23,550.00

Debtor 1	Markus Washington	Case number (if known) <b>24-51992</b>
	Tools of Trade: 8 dummy guns: \$160.00, Loa Protective Gear Eyes and Ears: \$240.00, Proje Condition 1 Case - Gun Case for all guns \$25 \$75.00, Ammo \$450.00, Targets \$50.00, Tripod \$250.00, Tripod view \$50.00, 3 Gun Fixtures (Mantix - laser system for dry firing \$150.00, C (Desk and Tables): \$100.00 "  Smokeless Range (Laser Ammo) \$2744.91, 2r "Instructor Kits x 3 = \$2997.00 o 6 adult mannikins o 6 infant mannikins o 6 infant mannikins o 6 AED's o and other tools included for first aid, cpr, b EMR, and active shooter	ector \$150.00, 0.00, Steel Target d \$100.00, GoPro optics) \$500.00 total, ffice Equipment ad Projector \$840.00
	Guns used for training: Canik Rival S \$1,500 Canik Mete SFX \$600 Canik Mete SFX \$600 Glock 19 MOS \$850 Glock 17 \$579 Glock 45 MOS \$620 Glock 43X \$488 Walther PDP \$649 Walther PDP-F \$699 Rock Island VRBP 100 \$500 Custom AR-15 \$3,500 Taurus TX22 \$280 Taurus TX22 \$280 Taurus TX22 \$280 S&W EZ \$400 Diamondback Sidekick \$288 Taurus 856 \$379 Glock 48 MOS \$500 Staccato P \$3,400	\$16,392.00
	Describe	
■ No	Give specific information about them  Name of entity:	% of ownership:
■ No.	mer lists, mailing lists, or other compilations ur lists include personally identifiable information (as defined in 11 U.S.C. § 10	(41A))?
	■ No □ Yes. Describe	

44. Any business-related property you did not already list

☐ Yes. Give specific information.......

■ No

Deb	otor 1	Markus Washington		Case number (if known)	24-51992
45.		the dollar value of all of your entries from Part 5, included art 5. Write that number here		es you have attached	\$46,524.00
Part		scribe Any Farm- and Commercial Fishing-Related Property Y ou own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	et In.	
46.	Do yoι	ı own or have any legal or equitable interest in any farı	n- or commercial fishin	g-related property?	
	No.	Go to Part 7.			
	☐ Yes	. Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
53.		have other property of any kind you did not already li bles: Season tickets, country club membership	st?		
	No				
	☐ Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write	that number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	l: Total real estate, line 2			\$687,650.00
56.	Part 2	2: Total vehicles, line 5	\$35,517.00		
57.	Part 3	3: Total personal and household items, line 15	\$16,450.00		
58.	Part 4	1: Total financial assets, line 36	\$32,010.99		
59.	Part 5	5: Total business-related property, line 45	\$46,524.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54	+\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$130,501.99	Copy personal property to	otal <b>\$130,501.99</b>
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$818,151.99

Fill in this inform	nation to identify your	case:		
Debtor 1	Markus Washingt	ton		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	WESTERN DISTRICT O	OF TEXAS	
Case number	24-51992			
(if known)				Check if this is an
				amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
182 Lantana Path Castroville, TX 78009 Medina County	\$687,650.00		\$319,148.25	Tex. Const. art. XVI, §§ 50, 51, Tex. Prop. Code §§
Homestead, less than 1 acre Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit	41.001002
2019 Toyota Camry 88000 miles NFS Vehicle: Toyota Loan in NFS	\$20,732.00		\$8,010.22	11 U.S.C.A. § 541(a)(2); Tex. Fam. Code § 3.202
only Spouse's Sole management community property Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	· • • • • • • • • • • • • • • • •
2019 Indian Chieftain Ltd 11000 miles Line from Schedule A/B: 3.2	\$14,785.00		\$1.00	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(9)
Line Hoff Scredule A/D. 3.2			100% of fair market value, up to any applicable statutory limit	42.001(a)(1), (2), 42.002(a)(0)
Household Goods and Furniture Line from Schedule A/B: 6.1	\$10,000.00		\$10,000.00	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(1)
Elito Holli Goriodalo 7 y D. Gri			100% of fair market value, up to any applicable statutory limit	.2.00.(\alpha)(\dots), \dots2.002(\alpha)(\dots)

			Case number (if known)	24-51992
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Electronics Line from Schedule A/B: 7.1	\$3,000.00		\$3,000.00	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(1
			100% of fair market value, up to any applicable statutory limit	
Gym Equipment Line from Schedule A/B: 9.1	\$1,000.00		\$1,000.00	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(8
			100% of fair market value, up to any applicable statutory limit	
Wearing Apparel Line from Schedule A/B: 11.1	\$800.00		\$800.00	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(5
Life from Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	42.001(a)(1), (2), 42.002(a)(0
Jewelry Line from Schedule A/B: 12.1	\$1,400.00		\$1,400.00	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(6
Line from Schedule AVB. 12.1			100% of fair market value, up to any applicable statutory limit	42.001(a)(1), (2), 42.002(a)(0
Lawn Maintenance Equipment Line from Schedule A/B: 14.1	\$50.00		\$50.00	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(1
Line from Schedule A/B: 14.1			100% of fair market value, up to any applicable statutory limit	42.001(a)(1), (2), 42.002(a)(1
IRA: Ally 6661(W)	\$3,525.56		\$3,525.56	Tex. Prop. Code § 42.0021
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
Child Support: Right to Receive CS 167.00 /mo	Unknown		100%	Tex. Prop. Code § 42.001(b) 100% FMV
Line from Schedule A/B: 29.1			100% of fair market value, up to any applicable statutory limit	
Military Retirement Midland Life Insurance (Term Life) \$400,00.00	Unknown		100%	Tex. Ins. Code § 1108.051 100% FMV
Beneficiary: Co-Debtor Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
Pacific Life Insurance (Term) \$1,500,000.00	Unknown		100%	Tex. Ins. Code § 1108.051 100% FMV
Beneficiary: Debtor Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
Right to Receive VA Benefits \$4335.16/mo	Unknown	•	100%	38 U.S.C. § 5301(a) 100% FM
Line from Schedule A/B: 35.1			100% of fair market value, up to any applicable statutory limit	
Right to Receive Retirement Income	Unknown		100%	11 U.S.C. § 522(b)(3)(C) 100°
\$3128.00/mo				

De	btor 1	Mai	rkus Washington			Case number (if known)	24-51992
			iption of the property and line on \( \begin{align*} B \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
				Copy the value from Schedule A/B	Cne	ck only one box for each exemption.	
	201 mile		evy Silverado 1500, 85K	\$23,550.00		\$1.00	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(4)
	Use driv bei	ed for e for ng in	weapons training so doesn't personal use due to guns vehicle. Schedule A/B: <b>40.1</b>			100% of fair market value, up to any applicable statutory limit	100% FMV
			Trade: 8 dummy guns : Loaders : \$140.00,	\$6,582.00		\$6,582.00	Tex. Prop. Code §§ 42.001(a)(1), (2), 42.002(a)(4)
	Pro \$24 1 C: \$25 \$45 \$10	tectives. 0.00, ase - 0.00, 0.00, 0.00,	re Gear Eyes and Ears: Projector \$150.00, Condition Gun Case for all guns Steel Target \$75.00, Ammo Targets \$50.00, Tripod GoPro \$250.00, Tripod Schedule A/B: 40.2			100% of fair market value, up to any applicable statutory limit	
			ed for training:	\$16,392.00		\$16,392.00	Tex. Prop. Code §§
	Car Car Glo Glo Glo Wal Wal Roo Cus Tau	nik Me nik Me ock 19 ock 45 ock 43 Ither I Ither I stom I Irus T	val S \$1,500 ete SFX \$600 ete SFX \$600  MOS \$850  \$579  MOS \$620  X \$488  PDP \$649  PDP-F \$699  and VRBP 100 \$500  AR-15 \$3,500  X22  Schedule A/B: 40.3			100% of fair market value, up to any applicable statutory limit	42.001(a)(1), (2), 42.002(a)(4) 100% FMV
3.			laiming a homestead exemption of adjustment on 4/01/25 and every 3			led on or after the date of adjustmen	t.)
	_		Did you acquire the property covere	ed by the exemption wi	thin 1	,215 days before you filed this case?	)
	_		No	,		. ,	
			Yes				

Fill in th	is information	on to identify you	r case:					
Debtor 1	N	/larkus Washin	aton					
		irst Name	Middle Name Last Nat	ne				
Debtor 2 (Spouse if, t		irst Name	Middle Name Last Nar	me				
United S	tates Bankru	ptcy Court for the:	WESTERN DISTRICT OF TEXAS					
Case nui	mber <b>24-5</b>	1992						
(if known)							☐ Check	if this is an
							amend	ed filing
Officia	l Form 1	06D						
Sche	dule D:	Creditors	Who Have Claims Secu	ıred	l by Property	y		12/15
	copy the Add		If two married people are filing together, both a out, number the entries, and attach it to this fo					
1. Do any	creditors have	e claims secured by	your property?					
$\square$ N	o. Check this	box and submit tl	nis form to the court with your other schedul	es. Yo	ou have nothing else to	rep	ort on this form.	
<b>■</b> Y	es. Fill in all o	of the information	pelow.					
Part 1:	I ist All Se	cured Claims						
			nore than one secured claim, list the creditor sepa	arately	Column A	Col	umn B	Column C
for each c	laim. If more t	han one creditor has	a particular claim, list the other creditors in Part 2 cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.		ue of collateral t supports this	Unsecured portion If any
2.1 <b>Co</b>	nn's Home	Plus	Describe the property that secures the claim	:	\$3,126.00	Ciai	**************************************	\$2,926.00
24		ogy Forest	TV and freezer from 2019		·			
Bu Th	oulevard iilding 4, Si e Woodlan 381		As of the date you file, the claim is: Check all the apply.  Contingent	l nat				
Num	nber, Street, City,	State & Zip Code	☐ Unliquidated					
			☐ Disputed					
Who owe	es the debt?	Check one.	Nature of lien. Check all that apply.					
Debtor	r 1 only		An agreement you made (such as mortgage	or secu	ured			
☐ Debtor	,		car loan)					
	r 1 and Debtor		☐ Statutory lien (such as tax lien, mechanic's li	en)				
_		ebtors and another	Judgment lien from a lawsuit					
	t if this claim in the claim in	relates to a	Other (including a right to offset)					
		Opened 12/17 Last						
Date debi	t was incurred	Active	Last 4 digits of account number 0	870				

Debtor 1 Markus Washington		Case number (if known)	24-51992	
First Name Middle N	lame Last Name			
2.2 Freedom Mortgage Corporation	Describe the property that secures the claim:	\$367,223.39	\$687,650.00	\$0.00
Creditor's Name  Attn: Bankruptcy 907 Pleasant Valley Ave, Ste 3 Mt Laurel, NJ 08054	182 Lantana Path Castroville, TX 78009 Medina County Homestead, less than 1 acre As of the date you file, the claim is: Check all that apply.  ☐ Contingent			
Number, Street, City, State & Zip Code  Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)			
☐ Debtor 1 and Debtor 2 only  ■ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)  First Mod	rtgage		
Opened 01/20 Last Active Date debt was incurred 8/31/23	Last 4 digits of account number 071	9		
2.3 Medina County Tax Assessor	Describe the property that secures the claim:	\$1,128.36	\$687,650.00	\$0.00
Melissa Lutz, PCC 1102 15th Street Hondo, TX 78861	182 Lantana Path Castroville, TX 78009 Medina County Homestead, less than 1 acre As of the date you file, the claim is: Check all that apply.  ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit	_		
■ Check if this claim relates to a community debt	Other (including a right to offset)  Property	Taxes		
Date debt was incurred	Last 4 digits of account number			

Debtor 1 Markus Was	btor 1 Markus Washington		Ca	ase number (if known)	24-51992		
First Name	Middle N	ame Last Name	_				
2.4 Navy FCU		Describe the property that secures	the claim:	\$31,735.65	\$23,550.00	\$8,185.65	
Creditor's Name  Attn: Bankrupto Po Box 3000 Merrifield, VA 22		2018 Chevy Silverado 1500 miles: Used for weapons training doesn't drive for personal uto guns being in vehicle. As of the date you file, the claim is apply.  Contingent	so use due	, , , , , , , , , , , , , , , , , , , ,	<b>V</b> 3,	<b>V V V V V V V V V V</b>	
Number, Street, City, Star		☐ Unliquidated					
Who owes the debt? Che	eck one.	☐ Disputed  Nature of lien. Check all that apply.					
Debtor 1 only		An agreement you made (such as	mortgage or secu	ured			
Debtor 2 only		car loan)					
Debtor 1 and Debtor 2 o		☐ Statutory lien (such as tax lien, me☐ Judgment lien from a lawsuit	echanic's lien)				
At least one of the debto		☐ Other (including a right to offset)					
Check if this claim rela community debt	ites to a	Other (including a right to onset)					
(	Opened 01/18 Last Active 9/30/23	Last 4 digits of account nun	nber 1005				
<u>-</u>				<u> </u>			
2.5 Performance Fig	nance	Describe the property that secures		\$18,706.54	\$14,785.00	\$3,921.54	
Creditor's Name		2019 Indian Chieftain Ltd 1 <sup>st</sup> miles	1000				
1515 W 22nd Str Oak Brook, IL 6		As of the date you file, the claim is apply.  Contingent	Check all that				
Number, Street, City, State	te & Zip Code	☐ Unliquidated					
Who owes the debt? Che	eck one.	☐ Disputed Nature of lien. Check all that apply.					
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as car loan)	mortgage or secu	ured			
Debtor 1 and Debtor 2 o	nlv	☐ Statutory lien (such as tax lien, me	echanic's lien)				
At least one of the debto		☐ Judgment lien from a lawsuit	70.10.110				
Check if this claim rela		Other (including a right to offset)	MC - H's Pe	rsonal vehicle			
(	Opened 08/19 Last Active 6/29/23	Last 4 digits of account nun	<sub>nber</sub> 0743				

Deptor 1 Markus Washington		Case r	number (if known)	24-51992	
First Name Middle N	Name Last Name	_			
2.6 Potranco Ranch HOS	Describe the property that secures t	the claim:	\$150.00	\$687,650.00	\$0.00
Creditor's Name c/o Diamond Association management 14603 Huebner road Bldg 40	182 Lantana Path Castroville 78009 Medina County Homestead, less than 1 acre As of the date you file, the claim is: apply.	•			
San Antonio, TX 78230	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as	mortgage or secured			
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim relates to a community debt	Other (including a right to offset)	HOA Dues			
Date debt was incurred	Last 4 digits of account num	ber			
2.7 Toyota Financial Services	Describe the property that secures t	the claim:	\$12,721.78	\$20,732.00	\$0.00
Attn: Bankruptcy Po Box 259001 Plano, TX 75025  Number, Street, City, State & Zip Code	NFS Vehicle; Toyota Loan ir only Spouse's Sole management community property As of the date you file, the claim is: apply.  Contingent Unliquidated Disputed	:			
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as car loan)	mortgage or secured			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Purchase Mone	y Security		
Date debt was incurred 10/19	Last 4 digits of account numb	ber <u>0001</u>			
Add the dollar value of your entries in C	Column A on this page. Write that num	ber here:	\$434,791	.72	
If this is the last page of your form, add Write that number here:	· -	ļ.	\$434,791		
Part 2: List Others to Be Notified for	or a Debt That You Already Listed				

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this info	rmation to identify your case:						
Debtor 1	Markus Washington						
	First Name	Middle Name	Last Name				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse if, filing)	FIRST Name	Middle Name	Last Name				
United States B	Bankruptcy Court for the: WES	STERN DISTRICT OF TEX	(AS				
Case number	24-51992						
(if known)	24-31332					Check	if this is an
					_		ed filing
O#: E	4005/5						
Official For							
Schedule	E/F: Creditors Who	Have Unsecured	Claims				12/15
eft. Attach the Co	litors Who Have Claims Secured bontinuation Page to this page. If youmber (if known).						
Part 1: List	All of Your PRIORITY Unsecui	red Claims					
1. Do any cred	itors have priority unsecured clain	ns against you?					
☐ No. Go to	Part 2.						
Yes.							
identify what possible, list	our priority unsecured claims. If a c type of claim it is. If a claim has both the claims in alphabetical order acco te than one creditor holds a particular	priority and nonpriority amount	ts, list that claim here a you have more than tw	and show both priority a	nd nonpriori	ty amount	s. As much as
(For an expla	anation of each type of claim, see the	instructions for this form in the	instruction booklet.)				
				Total claim	Priority amount		Nonpriority amount
2.1 Intern	al Revenue Service	Last 4 digits of accoun	nt number	\$11,127.89		\$1.00	\$11,126.89
,	Creditor's Name  al Procedures-Insolvency	When was the debt in	curred?				
•	Box 7346						
	lelphia, PA 19101-7346						
	Street City State Zip Code	As of the date you file	, the claim is: Check a	all that apply			
_	red the debt? Check one.	☐ Contingent					
■ Debtor 1	1 only	☐ Unliquidated					
Debtor 2	2 only	☐ Disputed					
Debtor 1	1 and Debtor 2 only	Type of PRIORITY uns	secured claim:				
☐ At least	one of the debtors and another	☐ Domestic support of	oligations				
☐ Check i	f this claim is for a community de	bt Taxes and certain or	ther debts you owe the	government			
Is the claim	n subject to offset?	☐ Claims for death or p					
■ No		☐ Other. Specify					
☐ Yes		20	19				

Debto	Markus Washington		Case	number (if known)	24-51992	
2.2	Misty Washington	Last 4 digits of account number		\$0.00	\$0.00	\$0.00
	Priority Creditor's Name 210 Campbell St	When was the debt incurred?			-	
	Anadarko, OK 73005  Number Street City State Zip Code	As of the date you file, the claim	is: Check	all that apply		
v	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
	At least one of the debtors and another	■ Domestic support obligations				
	Check if this claim is for a community debt	☐ Taxes and certain other debts☐ Claims for death or personal in	•	•		
_	s the claim subject to offset? ■ No	Other. Specify	jury write y	od were intoxicated		
	Yes	Current C	hild Sup	port		
2.3	OKDHS	Last 4 digits of account number	4001	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name Attn: Bankruptcy		Onene	d 9/24/07 Last		
	Po Box 248822 Oklahoma City, OK 73124	When was the debt incurred?		1/15/21	-	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check	all that apply		
V	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
	At least one of the debtors and another	■ Domestic support obligations				
	Check if this claim is for a community debt	☐ Taxes and certain other debts	you owe the	e government		
_	s the claim subject to offset?	Claims for death or personal in	jury while y	ou were intoxicated		
_	No ☐ Yes	Other. Specify		II end on May 202	<u> </u>	
	J 165	Ciliu Sup	port - wi	ii eiiu oii way 202		
2.4	Vanhemelrijck Law Offices, PC Priority Creditor's Name	Last 4 digits of account number		\$57.78	\$57.78	\$0.00
	2001 N.W Military Highway Castle Hills, TX 78213	When was the debt incurred?			-	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check	all that apply		
_	Vho incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
	At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt	☐ Taxes and certain other debts	•	•		
	s the claim subject to offset?	Claims for death or personal in				
	■ No ☑ Yes	Other. Specify Administr	ative Ex	penses		
	1.55					
Part 2	List All of Your NONPRIORITY Unsecu	ured Claims				
3. Do	any creditors have nonpriority unsecured claim	ns against you?				
	No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.			
	Yes.					
	st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each o					

		Total claim
Department of Veterans Affairs	Last 4 digits of account number	\$2,500.00
Nonpriority Creditor's Name Debt Management Center PO Box 11930 Saint Paul, MN 55111-0930	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Ed Ioan	
PHH Mortgage Services Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
P.O. Box 371458 Pittsburgh, PA 15250	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Steven Maduro	Last 4 digits of account number 0846	\$0.00
Nonpriority Creditor's Name 14535 Rawhide Way San Antonio, TX 78254	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	.,,	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?  ■ No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Void Lien	

24-51992

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1 Markus Washington

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 11,127.89
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$ 57.78
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 11,185.67
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6a.	Obligations arising out of a separation agreement or divorce that		
HOIII Fait 2	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 2,500.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 2,500.00

Fill in this inform					
Debtor 1	Markus Washingt	ton			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT C	OF TEXAS		
	24-51992				
(if known)					☐ Check if this is an
					amended filing

## Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Stuff Storage, LLC 3215 US Hwy 90E Castroville, TX 78009 Storage Unit Rental Lease Unit #421

Fill in thi	s information to identify your	case:		
Debtor 1	Markus Washing	jton		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, fi	ling) First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	WESTERN DISTRICT OF	TEXAS	
Case nun	nber <b>24-51992</b>			☐ Check if this is an amended filing
Officia	al Form 106H			
	dule H: Your Cod	lebtors		12/15
people and fill it out, so your nam  1. Do  No  Ye  2. Wi  Arizo	e filing together, both are equand number the entries in the e and case number (if known a you have any codebtors? (If the second of the last 8 years, have youna, California, Idaho, Louisiana of the company of the company of the last 8 years, have youna, California, Idaho, Louisiana of the company of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, California, Idaho, Louisiana of the last 8 years, have youna, control of the last 8 years, have youna, which youna, have you	ually responsible for supplying boxes on the left. Attach	ng correct informate Additional Page to not list either spouse erty state or territor or Rico, Texas, Washi	ry? (Community property states and territories include
	Yes.			
	In which community sta	te or territory did you live?	-NONE-	. Fill in the name and current address of that person.
in lin Form	e 2 again as a codebtor only	p Code tors. Do not include your sp if that person is a guarantor	or cosigner. Make:	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 16G). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name  Number Street			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	City	State	ZIP Code	
3.2	Name  Number Street			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	City	State	ZIP Code	

	in this information to identify your cotor 1  Markus Was									
	otor 2 use, if filing)	<u> </u>			_					
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRIC	T OF TEXAS		_					
	ze number 24-51992		-			☐ An a		d filing ent showin	ng postpetition	
Of	fficial Form 106I						1 / DD/ Y		ollowing date:	
	chedule I: Your Inc	ome				IVIIVI	1 / UU/ Y	111		12/15
spoi atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  t1: Describe Employment	ır spouse is not filing w	ith you, do not include	e infori	nati	on about y	our spo	use. If m	ore space is	needed,
1.	information.		Debtor 1			D	Debtor 2	or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				■ Emplo	oyed mployed		
	employers.	Occupation	Unemployment			s	self-em	ployed		
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here?				_			
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	ort for	any	line, write \$	60 in the	space. In	clude your no	n-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	for all e	mpl	oyers for the	at perso	n on the li	nes below. If	you need
						For Debto	or 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	0.00	
3.	Estimate and list monthly over	ime pay.		3.	+\$		0.00	+\$	0.00	
4	Calculate gross Income Add li	ne 2 + line 3		4	\$	0	00	\$	0.00	

Debtor 1	Markus Washington		Case number (if known)	24-51992
Co	py line 4 here	4.	For Debtor 1	For Debtor 2 or non-filing spouse  \$ 0.00
5. <b>Lis</b>	et all payroll deductions:			
5a 5b 5c 5d 5e 5f, 5g	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 + \$ 0.00
	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 0.00	\$ 0.00
7. <b>Ca</b>	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 0.00	\$ 0.00
8. <b>Lis</b> 8a 8b 8c 8c 8f.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependence regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Non-CMI VA benefits \$4231.61  Pension or retirement income	8c. 8d. 8e.	\$ 0.00 \$ 0.00 \$ 2,249.00 \$ 0.00 \$ 3,228.00 \$ 0.00	\$ 3,000.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 + \$ 0.00
9. <b>A</b> d	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	\$3,167.00
	Iculate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$	7,477.00 + \$	3,167.00 = \$ 10,644.00
Inc oth Do	ate all other regular contributions to the expenses that you list in <i>Schedu</i> lude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are no ecify:	ur depen	•	
Wr	d the amount in the last column of line 10 to the amount in line 11. The relate that amount on the Summary of Schedules and Statistical Summary of Certalistics			

Debtor agrees to update income information 30 days from when he becomes employed again.

13. Do you expect an increase or decrease within the year after you file this form?  $\hfill \square$   $\hfill No.$ 

Yes. Explain:

Fill in this information to identify your case:			
Debtor 1 Markus Washington	Ch	eck if this is:	
		An amended filing	
Debtor 2 (Spouse, if filing)	□	A supplement show 13 expenses as of	ving postpetition chapter
(Spouse, ii ming)		rs expenses as or	the following date.
United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS		MM / DD / YYYY	
Case number 24-51992			
(If known)			
Official Form 106J			
Schedule J: Your Expenses			12/1
Be as complete and accurate as possible. If two married people are filin information. If more space is needed, attach another sheet to this form. number (if known). Answer every question.			
Part 1: Describe Your Household			
1. Is this a joint case?			
■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?			
□ No			
☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Se	eparate Household of De	ebtor 2.	
2. Do you have dependents? ☐ No			
	pendent's relationship to otor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the			□ No
	ughter	17	Yes
_			□ No
			☐ Yes
			□ No
			☐ Yes
			□ No □ Yes
3. Do your expenses include			□ res
expenses of people other than yourself and your dependents?			
<u> </u>			
Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are	e using this form as a	supplement in a Cha	nter 13 case to report
expenses as of a date after the bankruptcy is filed. If this is a supplement applicable date.			
Include expenses paid for with non-cash government assistance if you			
the value of such assistance and have included it on Schedule I: Your In (Official Form 106I.)	ncome	Your expe	enses
(Gillotal Form Footi)			
<ol> <li>The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot.</li> </ol>	e first mortgage 4.	\$	0.00
If not included in line 4:			
4a. Real estate taxes	4a.	·	0.00
4b. Property, homeowner's, or renter's insurance	4b.		0.00
4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues	4c. 4d.	· ·	120.00 12.50
<ol> <li>Additional mortgage payments for your residence, such as home eq</li> </ol>			0.00

	Markus Washington	Case num	ber (if known)	24-51992
Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	260.00
6b.	Water, sewer, garbage collection	6b.		150.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00
6d.	Other. Specify: Cell Phones & Mobile Internet	6d.		329.72
	Internet and home phone		\$	146.07
	Trash		\$	35.02
	Streaming		\$	200.00
	2nd cell		\$	231.00
Food	and housekeeping supplies			960.00
	care and children's education costs	8.	\$	0.00
	ing, laundry, and dry cleaning	9.	\$	207.00
	onal care products and services	10.	· —	180.00
	cal and dental expenses	11.		65.00
	sportation. Include gas, maintenance, bus or train fare.		Ψ	03.00
	ot include car payments.	12.	\$	550.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	195.00
	itable contributions and religious donations	14.		0.00
Insur	<u> </u>		-	
	of include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	102.67
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.		288.83
15d.	Other insurance. Specify: Life Ins Deduction from Retirement	15d.	\$	100.00
	Dental Deduction from Retirement		\$	126.14
	Vision Deduction from Retirement		\$	36.68
Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ť	
Spec		16.	\$	0.00
	Ilment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	669.25
	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as			004.05
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		984.85
	r payments you make to support others who do not live with you.		\$	0.00
Spec	·	19.	_	
	r real property expenses not included in lines 4 or 5 of this form or on Scho		_	0.00
	Mortgages on other property	20a.	· · · · · · · · · · · · · · · · · · ·	0.00
	Real estate taxes	20b.	· .	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	Ψ	0.00
	Homeowner's association or condominium dues	20e.		0.00
	r: Specify: business char	21.		104.33
stora	age unit		+\$	100.00
Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	6,154.06
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	Add line 22a and 22b. The result is your monthly expenses.		\$	6 154 06
	, , ,		Ψ	6,154.06
	ulate your monthly net income.	00-	¢.	40.044.55
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	10,644.00
	Copy your monthly expenses from line 22c above.	23b.	-\$	6,154.06
23b.	Subtract your monthly expenses from your monthly income.			
23b.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	4,489.94
23b. 23c.  Do ye	The result is your monthly net income.  ou expect an increase or decrease in your expenses within the year after your expenses within the year after your carloan within the year or do you expect you	ou file this	form?	·
23b. 23c.  Do ye	The result is your monthly net income.  ou expect an increase or decrease in your expenses within the year after your expenses within the year after your cample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?	ou file this	form?	·

Fill in this in	formation to identify your	case:			
Debtor 1	Markus Washingt	on			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	WESTERN DISTRICT O	OF TEXAS		
Case number (if known)	24-51992				☐ Check if this is an amended filing
Official Fo	orm 106Dec				
Declara	ation About a	n Individual	Debtor's So	chedules	12/15
obtaining mo years, or both		connection with a bank			ent, concealing property, or or imprisonment for up to 20
Did you	pay or agree to pay some	one who is NOT an attor	ney to help you fill out I	bankruptcy forms?	
■ No					
☐ Yes	s. Name of person				otcy Petition Preparer's Notice, and Signature (Official Form 119)
	enalty of perjury, I declare vare true and correct.	that I have read the sum	mary and schedules file	ed with this declaration a	and
X /s/ N	Markus Washington		X		
Mar	kus Washington ature of Debtor 1		Signature of	Debtor 2	

Date October 24, 2024

Date \_\_\_\_

	l in this inforn	nation to identify you	r case:			
De	ebtor 1	Markus Washing	gton Middle Name	Last Name		
De	ebtor 2	i iist ivaille	ivildule Ivame	Last Name		
1	ouse if, filing)	First Name	Middle Name	Last Name		
Ur	nited States Bar	nkruptcy Court for the:	WESTERN DISTRICT OF	TEXAS		
Ca	ase number 2	24-51992				
1	known)	-1.0.002				Check if this is an
					a	mended filing
_						
	fficial Fo					
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	04/22
					equally responsible for sup	
		n). Answer every que		this form. On the top of an	y additional pages, write you	ir name and case
Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	Wilat is you	r current marital statu	1 <b>5</b> f			
	Married					
	☐ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	I.	
	Debtor 1:		Dates Debtor 1	Debtor 2 Prior Ac	Idress:	Dates Debtor 2
			lived there			lived there
3.					ity property state or territory	
Sia	les and territori	es include Anzona, Ca	illiornia, idano, Lodisiana, Ne	vada, New Mexico, Puerto R	ico, rexas, washington and w	ASCOTISITI.)
	□ No					
	■ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	ır Income			
_	Did you have	a any inaama fram ar	mulaymant as from anasotin	a a business during this w		adar vaara?
4.	Fill in the tota	al amount of income yo	u received from all jobs and a	all businesses, including part		idar years?
	If you are filin	ng a joint case and you	have income that you receive	e together, list it only once ur	nder Debtor 1.	
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
E-	om January 4	of current year until		,	<b>—</b>	and oxoldolollo)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$54,741.05	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deduction and exclusions)
	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$15,063.0
	☐ Operating a business		Operating a business	
For last calendar year: (January 1 to December 31, 2023 )	■ Wages, commissions, bonuses, tips	\$51,941.44	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2022)	■ Wages, commissions, bonuses, tips	\$64,374.00	☐ Wages, commissions, bonuses, tips	
	☐ Operating a business		☐ Operating a business	

winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

Debtor 2

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

Debtor 1

☐ No

Yes. Fill in the details.

	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	VA Benefits	\$42,316.00		
	Unemployment	\$1,557.00		
	Retirement Income	\$32,280.00		
For last calendar year: (January 1 to December 31, 2023)	VA Benefits	\$50,400.00		
	Retirement Income	\$38,736.00		
For the calendar year before that: (January 1 to December 31, 2022)	VA Benefits	\$50,400.00		
	Retirement Income	\$34,536.00		
		\$0.00	Unemployment	\$14,274.00

Del	btor 1	Ma	rkus Wasł	nington		Cas	e number (if known)	24-51992
Pa	rt 3:	List	Certain Pay	yments You Made Be	fore You Filed for Bankru	ptcy		
6.	_	<b>either</b> No.	Neither De	btor 1 nor Debtor 2 h	orimarily consumer debts as primarily consumer de family, or household purpo	ebts. Consumer debt	s are defined in 11	U.S.C. § 101(8) as "incurred by an
			□ No.	90 days before you file Go to line 7.	d for bankruptcy, did you p	ay any creditor a tota	ıl of \$7,575* or mo	re?
			Yes	paid that creditor. Do not include payments		ments and the total amount you ild support and alimony. Also, do		
	•	Yes.	Debtor 1 o	r Debtor 2 or both ha	ve primarily consumer de d for bankruptcy, did you p	ebts.		,
			■ No.	Go to line 7.				
			□ Yes	List below each credit	domestic support obligation			you paid that creditor. Do not Also, do not include payments to an
	Cre	ditor's	s Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
7.	Inside of what a bust alime	lers ind nich yd siness ony.	clude your re ou are an off you operate	elatives; any general pa icer, director, person ir	control, or owner of 20% of	neral partners; partne or more of their voting	erships of which you securities; and ar	was an insider? u are a general partner; corporations ny managing agent, including one for s, such as child support and
	Insi	der's	Name and A	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.	insid	der?		you filed for bankrupt ebts guaranteed or cos		yments or transfer a	ny property on a	ccount of a debt that benefited an
		No Voc. I	iat all nave	anta ta an incidar				
	⊔ Insi		Name and A	ents to an insider  Address	Dates of payment	Total amount	Amount you	Reason for this payment
						paid	still owe	Include creditor's name
Pa	rt 4:	lden	tify Legal A	ctions, Repossessio	ns, and Foreclosures			
9.	List a	all suc	h matters, in		ccy, were you a party in all cases, small claims action			
		<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>						
		e title e nun			Nature of the case	Court or agency		Status of the case
		ven L	_ Maduro S	Sr	Civil In the Justice Court			Pending
	Wa	rkus shing \$2300	gton	on; Aradia		Bexar Precinct	o, Place 1	☐ On appeal ☐ Concluded

	Case title Case number	Nature of the case	Court or agency	Status of th	ne case		
	Galaxy International Purchasing LLC	Civil In the JP Court PR 2 Medina County		☐ Pending ☐ On appe			
	v Aradia Washington 23DC-0137			■ Conclud	led		
	Conn Appliances, Inc dba CONN"S	Civil	In the JP Court PR 2 Medina County of Texas	☐ Pending ☐ On appe			
	Markus Washington 23DC-0129		,	☐ Conclud			
	Ron Stringfellow	Civil	In the JP Court PR 2 Medina County, Texas	☐ Pending ☐ On appe			
	Markus Washington & Aradia Rajeen Washington 24SC-0001		mounia County, Toxac	☐ Conclud			
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.		erty repossessed, foreclosed,	garnished, attached	d, seized, or levied?		
	☐ Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property		Date	Value of the property		
		Explain what happened	I		ргорен		
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca  No Yes. Fill in the details.		luding a bank or financial inst	itution, set off any a	amounts from your		
	Creditor Name and Address	Describe the action the	Date action was taken	Amoun			
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or ar		erty in the possession of an a	ssignee for the bene	efit of creditors, a		
	■ No □ Yes						
Par	t 5: List Certain Gifts and Contributions						
				<b>\$000</b>	•		
13.	Within 2 years before you filed for bankrupt  ■ No  □ Yes. Fill in the details for each gift.	ccy, did you give any girts	s with a total value of more th	an \$600 per person	<i>;</i>		
		December the wifter		Detec were many	Value		
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value		
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankrupt  No		s or contributions with a total	value of more than	\$600 to any charity?		
	Yes. Fill in the details for each gift or cont						
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you	contributed	Dates you contributed	Value		

Debtor 1 Markus Washington

Part 6: List Certain Losses

or gambling?				
■ No				
Yes. Fill in the details.				
Describe the property you lost and	Descril	oe any insurance coverage for the loss	Date of your	Value of property
how the loss occurred			loss	lost
		ce claims on line 33 of <i>Schedule AVB. Froperty.</i>		
7: List Certain Payments or Transfer	S			
consulted about seeking bankruptcy or	preparin	g a bankruptcy petition?		ty to anyone you
П №				
_ 110 _				
Person Who Was Paid		Description and value of any property	Date payment	Amount of
Address		transferred	or transfer was	payment
	You		made	
Vanhemelrijck Law Offices, PC		Attorney Fees	11/2023,	\$1,750.00
			1/2024	
jrv@vanlaws.com				
Court Filing Fee		Court Filing Fee	11/2023, 1/2024	\$338.00
CINI egal com		CR & Debtor FDU	11/2023	\$134.00
4540 Honeywell Court		on a position and	1/2024	ψ10-1.00
Dayton, OH 45424				
Venhamalriigh Law Offices DC		Attornov Food	40/2/2024	\$745.00
		Attorney Fees	10/3/2024	\$745.00
San Antonio, TX 78213				
jrv@vanlaws.com				
CINI agal com		CP & Debtor EDII	10/3/2024	\$69.00
		CK & Debioi EDO	10/3/2024	ф09.00
Dayton, OH 45424				
Court Filing Fee		Court Filing Fee	10/3/2024	\$313.00
promised to help you deal with your cre	ditors or	to make payments to your creditors?	or transfer any proper	ty to anyone who
■ No				
Yes. Fill in the details.				
Person Who Was Paid		Description and value of any property	Date payment	Amount of
Audiess		uanoieneu	made	payment
	No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  7: List Certain Payments or Transfer Within 1 year before you filed for bankruconsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No Yes. Fill in the details.  Person Who Was Paid Address Person Who Made the Payment, if Not Yanhemelrijck Law Offices, PC 2001 NW Military San Antonio, TX 78213 jrv@vanlaws.com  Court Filing Fee  CINLegal.com 4540 Honeywell Court Dayton, OH 45424  Vanhemelrijck Law Offices, PC 2001 NW Military San Antonio, TX 78213 jrv@vanlaws.com  CINLegal.com 4540 Honeywell Court Dayton, OH 45424  Court Filing Fee  Within 1 year before you filed for bankrupromised to help you deal with your crepton not include any payment or transfer that No No Yes. Fill in the details.	■ No □ Yes. Fill in the details.  Describe the property you lost and how the loss occurred  7: List Certain Payments or Transfers  Within 1 year before you filed for bankruptcy, diconsulted about seeking bankruptcy or preparing Include any attorneys, bankruptcy petition preparers  □ No □ Yes. Fill in the details.  Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You  Vanhemelrijck Law Offices, PC 2001 NW Military San Antonio, TX 78213 jrv@vanlaws.com  Court Filing Fee  CINLegal.com 4540 Honeywell Court Dayton, OH 45424  Vanhemelrijck Law Offices, PC 2001 NW Military San Antonio, TX 78213 jrv@vanlaws.com  CINLegal.com 4540 Honeywell Court Dayton, OH 45424  Court Filing Fee  Within 1 year before you filed for bankruptcy, diepromised to help you deal with your creditors of open onto include any payment or transfer that you listed  No □ Yes. Fill in the details.  Person Who Was Paid	No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  List Certain Payments or Transfers  Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required No Yes. Fill in the details.  Person Who Was Paid Address Person Who Was Paid Address Person Who Made the Payment, if Not You Vanhemelrijck Law Offices, PC 2001 NW Military San Antonio, TX 78213 jrv@vanlaws.com  Court Filing Fee Court Filing Fee  CINLegal.com CR & Debtor EDU  Vanhemelrijck Law Offices, PC 2001 NW Military San Antonio, TX 78213 jrv@vanlaws.com  CINLegal.com CR & Debtor EDU  Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.  Person Who Was Paid Description and value of any property	No

Debtor 1 Markus Washington

■ No										
Yes. Fill in the details.	☐ Yes. Fill in the details.									
Person Who Received Transfer Address	•		paym	nents received or debts	Date transfer was made					
Person's relationship to you				•						
_ 110										
	Description and	l value of the prop	ortu tron	oforrad	Date Transfer was					
Name of trust	Description and	i value of the prop	erty tran	sierreu	made					
List of Contain Financial Assessment		-!: D ! 0:-		4 -						
List of Certain Financial Accounts, ii	nstruments, Safe Depos	sit Boxes, and Sto	rage Uni	its						
Within 1 year before you filed for bankrupt	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed,									
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No										
Yes. Fill in the details.										
Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
Blue Vine 401 Warren Street Redwood City, CA 94063	XXXX-7513	■ Checking □ Savings □ Money Mark □ Brokerage □ Other_	et	12/2023	\$0.00					
Navy Federal Credit Union	xxxx-	■ Checking		2023	\$0.00					
PO Box 3501		•								
Merrifield, VA 22119		-	et							
		☐ Brokerage ☐ Other								
Do you now have, or did you have within 1 cash, or other valuables?  No Yes, Fill in the details.	year before you filed fo	or bankruptcy, any	/ safe de	eposit box or other depo	ository for securities,					
Name of Financial Institution	Who else had a	ccess to it?	Describe	the contents	Do you still					
Address (Number, Street, City, State and ZIP Code)		DC3011DC	, the contents	have it?						
Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?										
<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>										
Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?		Describe	the contents	Do you still have it?					
	transferred in the ordinary course of your include both outright transfers and transfers in include gifts and transfers that you have alreated include gifts and transfers that you have within 10 years before you filed for bankrub beneficiary? (These are often called asset-parent include asset-parent include description of trust.)  Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asset include checking, savings, money market, houses, pension funds, cooperatives, asset include checking, savings, money market, houses, pension funds, cooperatives, asset include checking, savings, money market, houses, pension funds, cooperatives, asset include checking, savings, money market, houses, pension funds, cooperatives, asset include checking, savings, money market, houses, pension funds, cooperatives, asset include checking, savings, money market, houses, pension funds, cooperatives, asset include checking, savings, money market, houses, pension funds, cooperatives, asset included that include the checking, savings, money market, houses, pension funds, cooperatives, asset included the checking, savings, money market, houses, pension funds, cooperatives, asset included the checking, savings, money market, houses, pension funds, cooperatives, asset included the checking, savings, money market, houses, pension funds, cooperatives, asset included the checking, savings, money market, houses, pension funds, cooperatives, asset included the checking, savings, money market, houses, pension funds, cooperatives, asset included the checking, asset included the c	transferred in the ordinary course of your business or financial al Include both outright transfers and transfers made as security (such as include gifts and transfers that you have already listed on this statemed No Yes. Fill in the details.  Person Who Received Transfer Address  Person's relationship to you  Within 10 years before you filed for bankruptcy, did you transfer abeneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and Description and No Yes. Fill in the details.  Name of trust  Description and Description and Address (Number, Street, City, State and ZIP Code)  Blue Vine XXXX-7513  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Navy Federal Credit Union XXXX-PO Box 3501  Merrifield, VA 22119  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you stored property in a storage unit or place other than you have you sto	transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a sinclude gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.  Person Who Received Transfer Address  Person Who Received Transfer Address  Person's relationship to you  Within 10 years before you filed for bankruptcy, did you transfer any property to a significancy? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property to a significancy? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property to a significancy (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred?  Include checking, savings, money market, or other financial accounts or instructions of transferred?  Include checking, savings, money market, or other financial accounts; certificates thouses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Navy Federal Credit Union PO Box 3501  Merrifield, VA 22119  Do you now have, or did you have within 1 year before you filed for bankruptcy, any cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Have you stored property in a storage unit or place other than your home within 1 yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.	transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.  Person Who Received Transfer Address Person's relationship to you  Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settle beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transfer any property to a self-settle beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transfer any property transfer and transfer any property transfer and the property in a storage and the property in a storage unit or place and the property and the propert	transferred in the ordinary course of your business or financial affairs?  Include both outight transfers and transfers made as security (such as the granting of a security interest or mortgage on you include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.  Person Who Received Transfer Address Person's relationship to you  Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of payments received or debts paid in exchange  Person's relationship to you  Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.)  No Yes. Fill in the details.  Name of trust  Description and value of the property transferred  Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts or instruments held in your name, or for sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts or instrument beneals, person funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depression, or other valuables?  No Yes. Fill in the details.  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  Yes. Fill in the details.  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  Yes. Fill in the details.					

Debtor 1 Markus Washington

	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?				
	Stuff Storage, LLC 3215 US Hwy 90E Castroville, TX 78009	Markus and Aradia Washington	mis personal property decorations	□ No ■ Yes				
Par	t 9: Identify Property You Hold or Control for	Someone Else						
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	No							
	Yes. Fill in the details.  Owner's Name	Where is the property?	Describe the property	Value				
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	t 10: Give Details About Environmental Inform	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	- ·					
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	under or in violation of an environm	ental law?				
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
25.								
	■ No □ Yes. Fill in the details.							
	Name of site	Governmental unit	Environmental law, if you	Date of notice				
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State an ZIP Code)	d know it					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	No							
	Yes. Fill in the details.  Case Title	Court or aganay	Nature of the case	Status of the				
	Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	case				
Par	t 11: Give Details About Your Business or Cor	nnections to Any Business						
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?								
	$\square$ A sole proprietor or self-employed in a	trade, profession, or other activity,	either full-time or part-time					
	A member of a limited liability company	(I I C) or limited liability partnersh	in (LLP)					

		☐ A partner in a partnership									
		☐ An officer, director, or managing ex	ecutive of a corporation								
		☐ An owner of at least 5% of the votin	·								
		No. None of the above applies. Go to F									
	_	_									
	_			F	Hander of an arms						
	Ad	siness Name dress	Describe the nature of the business		Identification number clude Social Security number or ITIN.						
	(Nu	mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed							
	At	Her Defense, LLC	Firearms Training Academy	EIN:	92-0908192						
		730 Potranco Rd, Ste 122141 n Antonio, TX 78251	Wife	From-To	1/1/2023 - Present						
	Ja	11 AIROIIIO, 1A 76251	Wile		1/1/2025 - 1 Tesent						
		Il Circl Defense, LLC	Firearms Training	EIN:	92-0907851						
		730 Potranco Rd, Ste 122141 n Antonio, TX 78251	Wife	From-To	1/1/23 to 12/31/23						
		Delta Chi Sorority, Inc	Firearms Sorority/Club	EIN:	88-2829872						
		103 West Ave, Ste 2101 n Antonio, TX 78213	(application for non-profit submitted)	From-To	4/13/22 - present						
			wife								
		No Yes. Fill in the details below.									
		me dress mber, Street, City, State and ZIP Code)	Date Issued								
Par	f 12-	Sign Below									
I have are to with 18 U	ve re true a a ba J.S.C Mar rkus	ad the answers on this <i>Statement of Fir</i> and correct. I understand that making a	nancial Affairs and any attachments, and I defalse statement, concealing property, or observed the second se	otaining mo	oney or property by fraud in connection						
Dat	е (	October 24, 2024	Date								
	you a	·	ent of Financial Affairs for Individuals Filing	g for Bankru	uptcy (Official Form 107)?						
Did :		pay or agree to pay someone who is not	t an attorney to help you fill out bankruptcy	forms?							
		Name of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, a	nd Signature	e (Official Form 119).						

Case number (if known) 24-51992

Debtor 1 Markus Washington

Fill in this information to identify your case:								
Debtor 1	Markus Washington							
Debtor 2 (Spouse, if filing)								
United States B	Bankruptcy Court for the: Western District of Texas							
Case number (if known)	24-51992							

Check	Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:										
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).									
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).									
	3. The commitment period is 3 years.									
	4. The commitment period is 5 years.									

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - ☐ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

						olumn A ebtor 1	Colum Debto non-fi	
<ol><li>Your gross wages, salary, to payroll deductions).</li></ol>	ps, bonuse:	s, overtime	, and c	ommissions (befo	re all \$_	6,458.29	\$	0.00
<ol> <li>Alimony and maintenance p Column B is filled in.</li> </ol>	ayments. D	o not include	e paym	ents from a spouse	if \$_	0.00	\$	0.00
<ol> <li>All amounts from any source of you or your dependents, from an unmarried partner, mand roommates. Do not include you listed on line 3.</li> </ol>	including chembers of your depayments	nild suppor our househol	<b>t.</b> Inclu	de regular contribut dependents, parer	ions its,	0.00	\$	167.00
<ol><li>Net income from operating business, profession, or far</li></ol>	Dalita.	r 1	De	ebtor 2				
Gross receipts (before all deductions)	\$	0.00	\$	1,383.08				
Ordinary and necessary operating expenses	-\$	0.00	-\$	3,930.26				
Net monthly income from a business, profession, or farm	\$	0.00	\$	0.00 he	py re -> \$	0.00	\$	0.00
6. Net income from rental and	other real p	roperty	Debto					
Gross receipts (before all ded	uctions)		\$	0.00				
Ordinary and necessary opera	ating expens	es	<b>-</b> \$ _	0.00				
Net monthly income from rent	al or other re	al property	\$	0.00 Copy he	ere -> \$	0.00	\$	0.00

				Column A Debtor 1		Column B Debtor 2 onon-filing	or	
7. <b>I</b>	nterest, dividends, and royalties			\$	0.00	\$ 	0.00	
8. <b>I</b>	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount receive the Social Security Act. Instead, list it here:	red was a benefit ur	nder					
	For you \$	0.00						
	For your spouse \$	0.00						
1 1 0 1	Pension or retirement income. Do not include any amount re- penefit under the Social Security Act. Also, except as stated in not include any compensation, pension, pay, annuity, or allows. United States Government in connection with a disability, com- disability, or death of a member of the uniformed services. If yo pay paid under chapter 61 of title 10, then include that pay only does not exceed the amount of retired pay to which you would f retired under any provision of title 10 other than chapter 61 of	n the next sentence, ance paid by the bat-related injury or ou received any ret y to the extent that I otherwise be entitle	r ired it	\$3,	228.80	\$	0.00	
] ) ) (	Income from all other sources not listed above. Specify the Do not include any benefits received under the Social Security received as a victim of a war crime, a crime against humanity, domestic terrorism; or compensation, pension, pay, annuity, or United States Government in connection with a disability, com disability, or death of a member of the uniformed services. If necessaries on a separate page and put the total below.	Act; payments or international or r allowance paid by bat-related injury or	the	·	0.00		0.22	
				\$	0.00		0.00	
				\$	0.00		0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	<u> </u>	0.00	
	Calculate your total average monthly income. Add lines 2 the each column. Then add the total for Column A to the total for			9,687.09	+ \$	167.00		9,854.09
Part 2	Determine How to Measure Your Deductions from In	ncome						
12. ( 13. (	Copy your total average monthly income from line 11 Calculate the marital adjustment. Check one:						\$	9,854.09
I	☐ You are not married. Fill in 0 below.							
l	$\square$ You are married and your spouse is filing with you. Fill in	0 below.						
-	You are married and your spouse is not filing with you.							
	Fill in the amount of the income listed in line 11, Column dependents, such as payment of the spouse's tax liability							
	Below, specify the basis for excluding this income and the adjustments on a separate page.	e amount of income	e dev	oted to each	purpos	se. If necessary	y, list addi	ional
	If this adjustment does not apply, enter 0 below.	Φ.						
		•			_			
			_		_			
	Total	\$		0.0	0	Copy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12	2.			_		\$	9,854.09
15.	Calculate your current monthly income for the year. Follo.  15a. Copy line 14 here=>	•					\$	9,854.09

Debto	r 1	wark	us wasnington		Case number (if known)	24-51992		
		Mul	tiply line 15a by 12 (the number of months in	a year).			<b>x</b> 12	
	15	b. The	result is your current monthly income for the	year for this part of th	e form		\$118	,249.08
16.	Cal	culate t	he median family income that applies to y	ou. Follow these step	s:			
	16a	. Fill in t	the state in which you live.	TX				
	16b	. Fill in t	the number of people in your household.	3				
	16c.	To find	he median family income for your state and s d a list of applicable median income amounts, tions for this form. This list may also be avail	go online using the li			\$89	,842.00
17.	Hov	v do th	e lines compare?					
	17a	. 🗆	Line 15b is less than or equal to line 16c. O 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do No					mined under
	17b	•	Line 15b is more than line 16c. On the top of 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 ab	lation of Your Dispo				
Part	3:	Calc	culate Your Commitment Period Under 11 t	J.S.C. § 1325(b)(4)				
18.	Cop	y your	total average monthly income from line 11	ı.		\$		9,854.09
	cont	tend tha	e marital adjustment if it applies. If you are at calculating the commitment period under 11 come, copy the amount from line 13.	married, your spouse U.S.C. § 1325(b)(4)	is not filing with you, and you allows you to deduct part of you	ur		
	19a	. If the r	marital adjustment does not apply, fill in 0 on l	ine 19a.		-\$		0.00
	19b	. Subtra	act line 19a from line 18.				\$9	,854.09
			your current monthly income for the year. line 19b	·			<sub>\$</sub> 9	,854.09
			ly by 12 (the number of months in a year).				x 12	<u> </u>
	20b	. The re	esult is your current monthly income for the ye	ear for this part of the f	form		\$118	3,249.08
	20c.	. Copy	the median family income for your state and s	size of household from	line 16c		\$89	,842.00
	21.	How o	do the lines compare?					
			ine 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the cour	t, on the top of page 1 of this fo	orm, check bo	ox 3, The c	ommitment
			ine 20b is more than or equal to line 20c. Unloommitment period is 5 years. Go to Part 4.	ess otherwise ordered	d by the court, on the top of pag	ge 1 of this fo	rm, check l	box 4, The
Part	By s	signing	n Below here, under penalty of perjury I declare that th	ne information on this	statement and in any attachme	nts is true an	d correct.	
X			us Washington					
			<b>Washington</b> of Debtor 1					
	_ `	Octo	<b>ober 24, 2024</b> DD / YYYY					
	If yo	u chec	ked 17a, do NOT fill out or file Form 122C-2.					

Debtor 1 Markus Washington Case number (if known) 24-51992

Fill in this information to identify your case:	
Debtor 1 Markus Washington	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: Western District of Texas	
Case number (if known) 24-51992	☐ Check if this is an amended filing
Official Form 122C-2 Chapter 13 Calculation of Your Disposable II	ncome 04/
To fill out this form, you will need your completed copy of <i>Chapter 13 Stateme Commitment Period</i> (Official Form 122C-1).	ent of Your Current Monthly Income and Calculation of
Be as complete and accurate as possible. If two married people are filing toge space is needed, attach a separate sheet to this form, Include the line number additional pages, write your name and case number (if known).	
Part 1: Calculate Your Deductions from Your Income	
The Internal Revenue Service (IRS) issues National and Local Standards for the questions in lines 6-15. To find the IRS standards, go online using the information may also be available at the bankruptcy clerk's office.	
Deduct the expense amounts set out in lines 6-15 regardless of your actual expenses if they are higher than the standards. Do not include any operating expenses if they are higher than the standards. Do not include any operating expenses in the property of the standards of the property	openses that you subtracted from income in lines 5 and 6 of Form
If your expenses differ from month to month, enter the average expense.	
Note: Line numbers 1-4 are not used in this form. These numbers apply to inforr	mation required by a similar form used in chapter 7 cases.
5. The number of people used in determining your deductions from inco	ome
Fill in the number of people who could be claimed as exemptions on your feet plus the number of any additional dependents whom you support. This number of people in your household.	
National Standards You must use the IRS National Standards to answ	ower the questions in lines 6-7.
Food, clothing, and other items: Using the number of people you entered     Standards, fill in the dollar amount for food, clothing, and other items.	ed in line 5 and the IRS National \$
7. Out-of-pocket health care allowance: Using the number of people you er the dollar amount for out-of-pocket health care. The number of people is sp people who are 65 or olderbecause older people have a higher IRS allow higher than this IRS amount, you may deduct the additional amount on line	plit into two categoriespeople who are under 65 and vance for health car costs. If your actual expenses are

Debior i		Markus Washington				Case number	(II KNOWI	24-5	1992		
Pec	ple w	vho are under 65 years of age									
	7a.	Out-of-pocket health care allowance per person	\$	83							
	7b.	Number of people who are under 65	X	3							
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	249.00		Copy here	=> \$	2	49.00		
Pec	ple w	vho are 65 years of age or older									
	7d.	Out-of-pocket health care allowance per person	\$	158							
	7e.	Number of people who are 65 or older	X	0							
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here	=> \$	i	0.00		
	7g.	Total. Add line 7c and line 7f			\$	249.00		Copy tot	al here=>	\$	249.00
Loc	al Sta	andards You must use the IRS Local Standards to	answe	r the question	ons in lin	es 8-15.					
		n information from the IRS, the U.S. Trustee Prog tcy purposes into two parts:	ram ha	s divided tl	he IRS L	ocal Standa	rd for	housing	g for		
		ing and utilities - Insurance and operating expens	ses								
<b>=</b> :	Housi	ing and utilities - Mortgage or rent expenses									
		er the questions in lines 8-9, use the U.S. Trustee						using t	he link s	pecified	l in the
<b>sep</b> 8.	Hou	e instructions for this form. This chart may also be using and utilities - Insurance and operating expe ne dollar amount listed for your county for insurance a	nses: ເ	Jsing the nu	mber of			d in line 5	, fill \$		706.00
9.		using and utilities - Mortgage or rent expenses:	and opo	raming expen	1000.				· <del>-</del>		
	9a.	Using the number of people you entered in line 5, fi listed for your county for mortgage or rent expenses		dollar amou	ınt		\$	1,6	22.00		
	9h	Total average monthly payment for all mortgages a	nd othe	r dehts secu	ired by v	our home					
	ob.	To calculate the total average monthly payment, ad contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.	d all am	nounts that a	are	our nome.					
		Name of the creditor		verage mo ayment	nthly						
		Freedom Mortgage Corporation	\$	2,3	329.52						
		Medina County Tax Assessor	\$		18.81						
		Potranco Ranch HOS	\$		15.00						
						Сору				D	4h:
		9b. Total average monthly paymen	t \$	2,3	863.33	here=>	-\$_	2,	363.33	on line	this amount 33a.
	9c.	Net mortgage or rent expense.							7		
		Subtract line 9b (total average monthly payment) from rent expense). If this number is less than \$0, enter		9a ( <i>mortgag</i>	ge	\$		0.00	Copy here=>	\$	0.00
10.		ou claim that the U.S. Trustee Program's division					g is in	correct a	ınd	<b>e</b>	0.00
	affe	cts the calculation of your monthly expenses, fill	ın any	additional	amount	you claim.				\$	0.00

Explain why:

11.	Local transportation expenses: Check the number of vehic	cles for w	hich you claim	an ov	vnershi	p or operating	g expense.	
	□ 0. Go to line 14.							
	☐ 1. Go to line 12.							
	2 or more. Go to line 12.							
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for							520.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.							
Vel	nicle 1 Describe Vehicle 1: 2019 Indian Chieftain L	td 1100	0 miles					
13a.	Ownership or leasing costs using IRS Local Standard				\$	619.00		
	Average monthly payment for all debts secured by Vehicle 1.				Ť ——	010.00		
100.	Do not include costs for leased vehicles.	•						
	To calculate the average monthly payment here and on line of are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.			at				
	Name of each creditor for Vehicle 1	Averag payme	je monthly nt					
	Navy FCU	\$	631.28					
	Performance Finance	\$	375.59					
	Total Average Monthly Payment	\$	1,006.87	Co <sub>l</sub>		.\$1,006	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0	, enter \$0	)		\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Vel	nicle 2 Describe Vehicle 2: 2019 Toyota Camry 880 NFS only Spouse's Sol							
13d.	Ownership or leasing costs using IRS Local Standard				\$	619.00		
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	. Do not i	nclude costs fo	r				
	Name of each creditor for Vehicle 2	Averag payme	je monthly nt					
	Toyota Financial Services	\$	264.08					
	Total average monthly payment	\$	264.08	Cop her =>	е	264.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense			_			Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0	)		\$	354.92	Vehicle 2 expense here => \$	354.92
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of v						n the	0.00
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Trans</i> .	hat you b	elieve is the ap					0.00

24-51992

Case number (if known)

**Markus Washington** 

Debtor 1

		the following IRS categorie		ns listed above	e, you are allowed your monthly expenses	s for			
16.	self-employment taxes, soci	ial security taxes, and Medio owever, if you expect to reco om the total monthly amoun	care taxe eive a tax	es. You may in k refund, you n	nd local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 for taxes.	\$	880.00		
17.	<b>Involuntary deductions:</b> To contributions, union dues, a		uctions t	hat your job re	equires, such as retirement				
	Do not include amounts that	are not required by your jo	b, such a	as voluntary 40	01(k) contributions or payroll savings.	\$	0.00		
18.	filing together, include paym	nents that you make for your life insurance on your dep	r spouse'	's term life insu	e insurance. If two married people are urance. g spouse's life insurance, or for any form	\$_	310.11		
19.	<b>Court-ordered payments:</b> administrative agency, such Do not include payments on	as spousal or child suppor	t paymer	nts.	I by the order of a court or  You will list these obligations in line 35.	\$_	984.85		
20.	Education: The total month as a condition for your jo								
	for your physically or me	\$	0.00						
21.	Childcare: The total monthl	\$	0.00						
22	Do not include payments for Additional health care exp				amount that you pay for health care	Ψ_			
22.	that is required for the health by a health savings account Payments for health insurar	\$	0.00						
23	•	· ·			you pay for telecommunication services	Ψ_			
20.	for you and your dependent phone service, to the extent income, if it is not reimburse Do not include payments for								
		nount you previously deducted.	+\$_	0.00					
	24. Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23								
24.	Add lines 6 through 23.	lowed under the IRS expe	nse allo	wances.		\$	5,681.88		
		·	leduction	ns allowed by t		\$	5,681.88		
Add	Add lines 6 through 23.  litional Expense Deduction  Health insurance, disabilit	s These are additional of Note: Do not include a ty insurance, and health s	leduction any exper	ns allowed by t nse allowance account exper			5,681.88		
Add	Add lines 6 through 23.  litional Expense Deduction  Health insurance, disabilit insurance, disability insuran	s These are additional of Note: Do not include a ty insurance, and health s	leduction any exper	ns allowed by t nse allowance account exper	s listed in lines 6-24.  ses. The monthly expenses for health		5,681.88		
Add	Add lines 6 through 23. litional Expense Deduction:  Health insurance, disabilit insurance, disability insurance, your dependents.	s These are additional of Note: Do not include a ty insurance, and health s	leduction any exper avings a bunts tha	ns allowed by t nse allowance account exper it are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health		5,681.88		
Add	Add lines 6 through 23.  litional Expense Deduction  Health insurance, disabilit insurance, disability insuran your dependents.  Health insurance	s These are additional of Note: Do not include a ty insurance, and health sce, and health savings according to the saving	leduction any experi avings a bunts tha	ns allowed by to nse allowance account experiment are reasonable 217.82	s listed in lines 6-24.  ses. The monthly expenses for health		5,681.88		
Add	Add lines 6 through 23.  litional Expense Deduction:  Health insurance, disability insurance, disability insurance, your dependents.  Health insurance  Disability insurance	s These are additional of Note: Do not include a ty insurance, and health sce, and health savings according to the saving	leduction any experience avings a bunts that \$\$	ns allowed by tonse allowance account expent are reasonate 217.82 6.74	s listed in lines 6-24.  ses. The monthly expenses for health		224.56		
Add	Add lines 6 through 23.  litional Expense Deduction:  Health insurance, disability insurance, disability insurancy your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to	These are additional of Note: Do not include a sty insurance, and health sce, and health savings accordance.	leduction any experience avings abounts that \$	ns allowed by tonse allowance account experit are reasonal 6.74 0.00	s listed in lines 6-24.  nses. The monthly expenses for health oly necessary for yourself, your spouse, o	or			
Add	Add lines 6 through 23.  litional Expense Deduction:  Health insurance, disability insurancy your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to the control of the	These are additional of Note: Do not include a sty insurance, and health sce, and health savings accordance.	leduction any experiments avings a bunts that \$	ns allowed by tonse allowance account experit are reasonal 6.74 0.00	s listed in lines 6-24.  nses. The monthly expenses for health oly necessary for yourself, your spouse, o	or			
Add	Add lines 6 through 23.  litional Expense Deduction:  Health insurance, disability insurancy your dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this to No. How much do you yes	s These are additional of Note: Do not include a sy insurance, and health sce, and health savings according to the street of the savings according to the saverage according to the savings according to the savings accordin	selection states a selection states are selected as se	as allowed by the seal of the	s listed in lines 6-24.  nses. The monthly expenses for health oly necessary for yourself, your spouse, o	or			
<b>Add</b> 25.	Add lines 6 through 23.  litional Expense Deduction:  Health insurance, disability insurancy dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to No. How much do you yes  Continuing contributions continue to pay for the reason	s These are additional of Note: Do not include a sy insurance, and health sice, and health savings according to the care of household conable and necessary care of your immediate family when the same are additional to the care of household conable and necessary care of your immediate family when the same are additional to the care of household conable and necessary care of your immediate family when the same are additional to the same are additional	leduction any experiments are avings a bounts that should be shown as a superiment of the should be should	as allowed by the seal of the	s listed in lines 6-24.  nses. The monthly expenses for health oly necessary for yourself, your spouse, of the company of the	or \$\$			
25. 26.	Add lines 6 through 23.  litional Expense Deduction:  Health insurance, disability insurance, disability insurancy your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to the savings account yes  Continuing contributions continue to pay for the reason your household or member include contributions to an approtection against family yes.	s These are additional of Note: Do not include a sty insurance, and health sce, and health savings according to the care of household onable and necessary care of your immediate family whaccount of a qualified ABLE violence. The reasonably mediate family whose the care of the care of your immediate family whose your immediate.	superior shall be a superi	as allowed by the seal of the	s listed in lines 6-24.  nses. The monthly expenses for health oly necessary for yourself, your spouse, of the company of the	or \$	224.56		

ebtor 1	Markus Washington		ase number (if k	(nown)	24-51	1992		
28.	Additional home energy costs. Your hom line 8.	e energy costs are included in your insuran	ce and opera	ating 6	expense	s on		
	If you believe that you have home energy c 8, then fill in the excess amount of home en	on line						
	You must give your case trustee documents amount claimed is reasonable and necessary		t show that t	he ad	ditional		\$	0.00
29.	Education expenses for dependent child \$189.58* per child) that you pay for your depublic elementary or secondary school.	ren who are younger than 18. The month pendent children who are younger than 18	ly expenses years old to	(not r attend	nore than	n e or		
	You must give your case trustee documental claimed is reasonable and necessary and n		t explain why	y the a	amount			
	* Subject to adjustment on 4/01/25, and even	ery 3 years after that for cases begun on or	after the date	e of a	djustmer	nt.	\$	0.00
30.	Additional food and clothing expense. Thigher than the combined food and clothing than 5% of the food and clothing allowance	allowances in the IRS National Standards.						
	To find a chart showing the maximum addit instructions for this form. This chart may also							
	You must show that the additional amount of		\$	0.00				
31.	<b>Continuing charitable contributions.</b> The instruments to a religious or charitable orga	ncial						
	Do not include any amount more than 15%	of your gross monthly income.					\$	100.00
32.	Add all of the additional expense deduct Add lines 25 through 31.		\$_	324.56				
Ded	uctions for Debt Payment							
	For debts that are secured by an interest oans, and other secured debt, fill in lines		e mortgage:	s, veh	icle			
	To calculate the total average monthly paym creditor in the 60 months after you file for bar		due to each s	secure	ed			
	Mortgages on your home						Avera	age monthly nent
33a.	Copy line 9b here					=>	\$	2,363.33
	Loans on your first two vehicles							
33b.	Copy line 13b here					=>	\$	1,006.87
33c.						=>	\$	264.08
33d.	List other secured debts:							
Nam	e of each creditor for other secured debt	Identify property that secures the debt		incl	es payme ude taxe nsurance	S		
					No			
	Conn's HomePlus	TV and freezer from 2019			Yes		\$	82.82
					No			
					Yes		\$	
							Ψ	
					No			
					Yes	+	-\$	
						0-		
33e	Total average monthly payment. Add lines	33a through 33d	\$	3,71	7.10	Copy total here=	> \$	3,717.10
							_	

Debtor 1

34. Are any debts that you listed in or other property necessary for						
☐ No. Go to line 35.						
	ou must pay to a creditor, in add possession of your property (ca Il in the information below.					
Name of the creditor	Identify property that secure	es the debt	Т	otal cure amount	Monthly amount	cure
Freedom Mortgage	182 Lantana Path Cas 78009 Medina County	y		25 271 42	· 00	421.19
Corporation	Homestead, less than	1 acre	\$ -	25,271.43	÷60 = \$ ÷60 = \$	421.19
	_		\$		÷ 60 = +\$	
					Сору	
			Total \$	421.19	total	421.19
35. Do you owe any priority claims are past due as of the filing date				t		
☐ No. Go to line 36.						
Yes. Fill in the total amount ongoing priority claims,	f all of these priority claims. Do such as those you listed in line		current or			
0 0.	st-due priority claims		\$	58.78	÷60 \$	0.98
36. Projected monthly Chapter 13 p			\$	4,000.00		
Current multiplier for your district a Office of the United States Courts the Executive Office for United States To find a list of district multipliers that in separate instructions for this form. This	(for districts in Alabama and No ates Trustees (for all other distri- ncludes your district, go online using	orth Carolina cts). the link speci	) or by X fied in the	10.00	2	
Average monthly administrative ex	rpense			\$400.00	Copy total here=> \$	400.00
37. Add all of the deductions for d	ebt payment. Add lines 33e thr	ough 36.			\$	4,539.27
<b>Total Deductions from Income</b>						
38. Add all of the allowed deduction	ıs.					
Copy line 24, All of the expenses expense allowances		\$	5,681.88			
Copy line 32, All of the additional		\$	324.56			
Copy line 37, All of the deduction		+\$	4,539.27	_		
Total deductions		\$	10,545.71	Copy total here=>	<b>&gt;</b> \$	10,545.71

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
□ 122C-1				☐ Increase	
□ 122C-2				☐ Decrease	\$
□ 122C-1				☐ Increase	
☐ 122C-2				☐ Decrease	\$
□ 122C-1				☐ Increase	
□ 122C-2				☐ Decrease	\$
□ 122C-1				☐ Increase	
☐ 122C-2				☐ Decrease	\$

Markus Washington	Case number (if known) 24-5199	02

Part 4:	Sign Below
	By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.
x	/s/ Markus Washington  Markus Washington Signature of Debtor 1
Date	October 24, 2024 MM / DD / YYYY

Debtor 1

### **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 04/01/2024 to 09/30/2024.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Wells Fargo Bank

Year-to-Date Income:

Starting Year-to-Date Income: \$15,991.31 from check dated 3/31/2024 Ending Year-to-Date Income: \$54,741.05 from check dated 9/30/2024 .

Income for six-month period (Ending-Starting): **\$38,749.74**.

Average Monthly Income: \$6,458.29 .

### Line 9 - Pension and retirement income

Source of Income: **DFAS** 

Income by Month:

6 Months Ago:	04/2024	\$3,228.80
5 Months Ago:	05/2024	\$3,228.80
4 Months Ago:	06/2024	\$3,228.80
3 Months Ago:	07/2024	\$3,228.80
2 Months Ago:	08/2024	\$3,228.80
Last Month:	09/2024	\$3,228.80
	Average per month:	\$3,228.80

### Non-CMI - VA Income

Source of Income: VA Income

Constant income of \$4,200.74 per month.

### **Current Monthly Income Details for the Debtor's Spouse**

### **Spouse Income Details:**

Income for the Period **04/01/2024** to **09/30/2024**.

### Line 4 & 40 - Child support income (including foster care and disability)

Source of Income: **CS** Income by Month:

income by wionin.		
6 Months Ago:	04/2024	\$167.00
5 Months Ago:	05/2024	\$167.00
4 Months Ago:	06/2024	\$167.00
3 Months Ago:	07/2024	\$167.00
2 Months Ago:	08/2024	\$167.00
Last Month:	09/2024	\$167.00
	Average per month:	\$167.00

### Line 5 - Income from operation of a business, profession, or farm

Source of Income: 2A Delta Chi Sorority

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	04/2024	\$0.00	\$0.00	\$0.00
5 Months Ago:	05/2024	\$0.00	\$0.00	\$0.00
4 Months Ago:	06/2024	\$0.00	\$0.00	\$0.00
3 Months Ago:	07/2024	\$0.00	\$0.00	\$0.00
2 Months Ago:	08/2024	\$0.00	\$0.00	\$0.00
Last Month:	09/2024	\$0.00	\$0.00	\$0.00
_	Average per month:	\$0.00	\$0.00	
			Average Monthly NET Income:	\$0.00

### Line 5 - Income from operation of a business, profession, or farm

Source of Income: **At Her Defense** Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	04/2024	\$2,354.00	\$2,144.10	\$209.90
5 Months Ago:	05/2024	\$1,891.50	\$2,082.71	\$-191.21
4 Months Ago:	06/2024	\$1,702.50	\$1,869.05	\$-166.55
3 Months Ago:	07/2024	\$1,272.50	\$3,451.57	\$-2,179.07
2 Months Ago:	08/2024	\$603.00	\$2,097.35	\$-1,494.35
Last Month:	09/2024	\$475.00	\$11,936.77	\$-11,461.77
_	Average per month:	\$1,383.08	\$3,930.26	
			Average Monthly NET Income:	\$-2,547.18

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
_	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court Western District of Texas

In	re	Markus Washington			Case No.	24-51992
	-	-		Debtor(s)	Chapter	13
		DISCLOSURE OF CO	OMPENSATIO	ON OF ATTORNE	Y FOR DE	CBTOR(S)
1.	con	rsuant to 11 U.S.C. § 329(a) and Fed. Bank inpensation paid to me within one year beforendered on behalf of the debtor(s) in conte	re the filing of the po	etition in bankruptcy, or ag	reed to be paid	to me, for services rendered or to
		For legal services, I have agreed to accep	t		\$	4,100.00
		Prior to the filing of this statement I have	received		\$	745.00
		Balance Due			\$	3,355.00
2.	The	e source of the compensation paid to me wa	ıs:			
		■ Debtor □ Other (specify):				
3.	The	e source of compensation to be paid to me i	s:			
		■ Debtor □ Other (specify):				
4.		I have not agreed to share the above-discle	osed compensation w	vith any other person unles	s they are memb	pers and associates of my law firm
		I have agreed to share the above-disclosed copy of the agreement, together with a list				
5.	In	return for the above-disclosed fee, I have ag	greed to render legal	service for all aspects of the	ne bankruptcy c	ase, including:
	b. c. d.	Analysis of the debtor's financial situation, Preparation and filing of any petition, sche Representation of the debtor at the meeting [Other provisions as needed]  Negotiations with secured cred reaffirmation agreements and a 522(f)(2)(A) for avoidance of lies	dules, statement of a g of creditors and con itors to reduce to pplications as ne ns on household	ffairs and plan which may nfirmation hearing, and any market value; exempt eded; preparation and goods.	be required; adjourned hear ion planning; filing of motiv	rings thereof;
6.	Ву	agreement with the debtor(s), the above-dis Representation of the debtors is any other adversary proceeding	n any dischargea	include the following servi bility actions, judicial I	ice: ien avoidance	es, relief from stay actions or
			CERTI	FICATION		
this		ertify that the foregoing is a complete statem struptcy proceeding.	nent of any agreeme	nt or arrangement for payn	nent to me for re	epresentation of the debtor(s) in
_	Octo Date	ober 24, 2024		/s/ J. Robert Vanheme J. Robert Vanhemelrij Signature of Attorney Vanhemelrijck Law Of 2001 NW Military San Antonio, TX 7821 (210) 804-1529 Fax: ( jrv@vanlaws.com Name of law firm	ck 24056468 fices, PC 3	)
Dat	te <u>(</u>	October 24, 2024	Signature	/s/ Markus Washington Debtor	on	

### United States Bankruptcy Court Western District of Texas

In re	Markus Washington		Case No.	24-51992		
		Debtor(s)	Chapter	13		
	VERIFI	CATION OF CREDITOR	MATRIX			
The ab	The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.					
Date:	October 24, 2024	/s/ Markus Washington				
		Markus Washington				

Signature of Debtor